Independent Citizens Redistricting Commission

Application Review and Quality Control Sheet

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Applicant Name: Heath	Cerr High	ight
Date Received: 1-13	Applicant Number:	0159
Recommended Applicant Pool Status: Final Applicant Pool Status:		
☐Included ☐Removed	Included	Removed
REQUIREMENTS:	į	
Was the application received before the subm	nission deadline?	□Yes □No
If NO, list time/date application was receiv	ed:	_ /
2. Is the application complete? If NO, list the item(s) that need to be comp	leted:	Yes No
3. Indicate how the applicant responded to the	following questions:	
A. Student enrolled in a college/university in	the City of Austin?	□Yes □No
If YES, consider I and ii only; If NO, consider	r I, ii, iii, and iv:	
i. Reside in the City of Austin?	d	☐Yes ☐No
ii. Registered to vote in the City of A	ustin?	✓Yes □No
iii. Continuously registered to vote in	the City of Austin?	☑Yes ☐No
iv. Voted in 3 of the last 5 City of Aus	stin general elections?	Yes 🗆 No
❖ Follow-up needed related to REQUIREMENTS	?	□Yes □No
If YES, identify issue(s) addressed and dispo		

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~~	ONFLICTS OF INTEREST:	,
		Yes No
4.	Did the applicant respond "Yes" to any conflict of interest questions?	LI Yes ZINO
	If YES, indicate which question(s):	
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÷	Follow-up needed related to CONFLICTS OF INTEREST?	□Yes ☑No
•	If YES, identify issue(s) addressed and disposition:	/
	y (25), identify issue(s) and its	
<u>C(</u>	ONSISTENCY:	
5.	Are applicant answers consistent?	☑Yes ☐No
	If NO, indicate which answer(s):	
		The contract of
_	TO THE CONCICTENCY?	□Yes ☑No
•••	Follow-up needed related to CONSISTENCY? If YES, identify issue(s) addressed and disposition:	,
	ij YES, identijy issue(s) dadressed diid disposition.	
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	Application Reviewed By:	1-14-15
	OC Review Pote:	2/25/13
1 /	Quality Control Review By:	

Follow-up Contact(s) Reviewed By: